



National Customer Support Center
Address Change Service Application —
OneCode^{ACS}

Mail Classification	Company Name	Taxpayer ID	
OneCode^{ACS} Contact Information		Business Entity ID Number	
Attention Line			
Company Name		<input type="checkbox"/> I need a new Business Entity ID Number	
Street Address		Apt./Ste. Number	
City	State	ZIP + 4 [®]	
Telephone Number (Include area code)		Extension	
Fax Number (Include area code)		Email Address	
OneCode^{ACS} Billing Information		Mailpiece Weight	
Attention Line		(Standard Mail TM service only)	
Company Name		<input type="checkbox"/> 1 oz. or Less <input type="checkbox"/> Greater Than 1 Oz.	
Street Address		Apt./Ste. Number	
City	State	ZIP + 4	
Telephone Number (Include area code)		Extension	
Fax Number (Include area code)		Email Address	
OneCode^{ACS} Mailpiece Preferred Return Address		Fulfillment Schedule	
Street Address		<input type="checkbox"/> Daily <input type="checkbox"/> Bi-monthly	
City	State	<input type="checkbox"/> Bi-weekly <input type="checkbox"/> Monthly	
Telephone Number (Include area code)		<input type="checkbox"/> Weekly	
Fax Number (Include area code)		Email Address	
OneCode^{ACS} Fulfillment		Ancillary Service Endorsement	
Street Address		(Options apply to First-Class Mail [®] service only)	
City	State	<input type="checkbox"/> Address Service Requested	
Telephone Number (Include area code)		<input type="checkbox"/> Option 1 <input type="checkbox"/> Option 2	
Fax Number (Include area code)		<input type="checkbox"/> Change Service Requested	
Street Address		<input type="checkbox"/> Option 1 <input type="checkbox"/> Option 2	
City	State	ZIP + 4	

OneCode^{ACS} is only available through the web.
Please remember to complete PS Form 1357-W and submit with this application.

You can download a copy of PS Form 1357-W from <http://www.usps.com/forms/allforms.htm>.
Or, you may order a copy by calling our Address Change Service Department at 800-331-5746.

OneCode^{ACS} Business Entity Identifier (BEI) Information		Shipper-Paid Forwarding	BEI Code
Please enter the mailpiece title(s) for which you are requesting BEI codes. We will notify you with the codes within 10 days of receipt of your application. Photocopy additional pages if necessary.		(Standard mail and Package Services)	(USPS [®] use only)
Mailpiece Title(s)		<input type="checkbox"/> Y <input type="checkbox"/> N	
		<input type="checkbox"/> Y <input type="checkbox"/> N	
		<input type="checkbox"/> Y <input type="checkbox"/> N	
		<input type="checkbox"/> Y <input type="checkbox"/> N	
Authorization		Complete this application and mail or fax to:	
I hereby authorize the United States Postal Service [®] to provide change-of-address information for the mailpiece title(s) listed, under the prescribed terms and conditions of the Address Change Service (ACS). I understand that OneCode ^{ACS} is an electronic correction process only and if my mailpiece barcode is not readable, no address correction information will be provided.		ADDRESS CHANGE SERVICE DEPT NATIONAL CUSTOMER SUPPORT CENTER UNITED STATES POSTAL SERVICE 6060 PRIMACY PKWY STE 201 MEMPHIS TN 38188-0001	
Name (Please print clearly)	Title	FAX: 901-821-6204 COM: 800-331-5746	
Signature		Date Signed	